



Swim Lessons 2010
Bay County Swimming Pool

Student Name: _____ Age: _____

Level (please circle): 1 2 3 4 5 6 7

Has your child had lessons before? YES NO

Sessions (please indicate session desired)

Session One:

Morning – Mondays & Wednesdays, 12:00 p.m. to 12:45 p.m. _____

June 14th thru July 7th

Evening – Tuesdays & Thursdays, 7:00 p.m. to 7:45 p.m. _____

June 15th thru July 8th

Session Two:

Morning – Mondays & Wednesdays, 12:00 p.m. to 12:45 p.m. _____

July 12th thru August 4th

Evening – Tuesdays & Thursdays, 7:00 p.m. to 7:45 p.m. _____

July 13th thru August 5th

Cost: \$30.00 per session (8 lessons)

*Payment is due on or before day of first lesson

Parent/Guardian Name(s): _____

Address: _____

Contact Number(s): Home/Cell: _____ Work: _____

Office Use Only

| Date | Amount Paid | Type of Pay | Check # | Initials |
|------|-------------|-------------|---------|----------|
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